UTILITY PATENT APPLICATION TRANSMITTAL UNDER 37 CFR 1.53(b)					ATTORNEY DOCKET 86270NAB Customer No. 01333				
To: Commissioner for Patents					press M	ail Lat	oel No.		
P.O. Box 1450					٥				
Alexandria, VA. 22313-1450				EV 293509893 US			<u> </u>		
INTEGRATED SCAN MODULE FOR A COMPUTER RADIOGRAPHY INPUT SCANNING SYSTEM					te: <u>N</u> [ven	1ber 21,2003	17858 U.S. PTO 10/719630	
First Named Inventor (or Application Identifier):								-	
Seung-Ho Baek, et al								22222	
Enclosed are: 1. X Specification					6. X Assignment of the invention to Eastman Kodak Company				
2. Sheet(s) of drawing(s)					7. Certified copy of a priority				
3. X Information Disclosure Statement Under 37 CFR 1.97.					8.	Associate Power of Attorney			
4. Combined Declaration for Patent Application and Power of Attorney: 4a. X New									
4b. Copy from a prior application (37 CFR 1.63(d) (for continuation/divisional with Box 11 completed)									
5. Incorporation by Reference (useable if Box 4b is 9. Deletion of Inventor(s).									
checked) The entire disclosure of the prior application, from Signed statement attached deleting inventor(s) name									
which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying 1.33(b).) and	
application and is hereby incorporated by reference therein.									
10. If a 111A application prior to examination of the above-identified application, amend the specification at Page 1,									
after the title, by inserting the following:CROSS REFERENCE TO RELATED APPLICATION									
Reference is made to and priority claimed from U.S. Provisional Application Serial No.,									
filed, entitled.									
If a CONTINUING APPLICATION, check appropriate box and supply the re						quisite ir	itormation:		
11. Continuation Divisional Continuation-in-part (CIP) of prior application No:									
12. X Please address all w							Staff,		
Eastman Kodak Cor Please Direct all tele						01.			
The filing fee has been calcula	-			505 5	700 2720.				
FOR:		. FILED	NO. EXTR.	ΑT	RATE		FEE		
BASIC FEE							\$ 770		
TOTAL CLAIMS	20	- 20 =	0		x 18 =		\$ 0		
INDEPENDENT CLAIMS	IT CLAS	-3=	-1 ITED	l_	x 86 =		\$0		
MULTIPLE DEPENDEN	VI CLA	IM PRESEN	TED		+ 29 TOT		\$ 0 \$ 770		
					101	AU .	\$ 770		
X Please charge my Eastman Kodak Company Deposit Account No. <u>05-0225</u> in the amount of \$ 770 A duplicate copy of this sheet is enclosed									
X The Commissioner is hereby authorized to charge any additional filing fees required under									
37 CFR 1.16 or credit any overpayment to Eastman Kodak Company Deposit Account No. 05-0225.									
A duplicate c py of this sheet is enclosed.									
						ンバ	<u> </u>		
Nelson A. Blish/tmp	orne	orney for Applicants							
					istration No. 29,134				

Facsimile: 585-477-4646